



DEPARTMENT OF VETERANS AFFAIRS
Palo Alto Health Care System
3801 Miranda Ave.
Palo, Alto, CA 94304

ATTACHMENT B

In reply refer to:

City of Sunnyvale
Attention: Eric DeWees
456 West Olive Ave
Sunnyvale, CA 94088

Dear Mr. DeWees,

It was a pleasure speaking with you last week regarding the Department of Veterans Affairs interest in Onizuka AFS. The VA Palo Alto Health Care System is one of the largest VA Medical Centers in the Department of Veterans Affairs, employs a workforce of approximately 2,800 staff with an operating budget surpassing \$500,000,000.

Last year, over 82,000 veterans were enrolled within our Health Care System, many of whom live right here in Silicon Valley. Our continued growth necessitates more space for which to expand our research programs. With a research budget surpassing \$52,000,000, VA Palo Alto Health Care System operates the 3rd largest research enterprise within the Department of Veterans Affairs. VA Palo Alto Health Care System's research staff has surpassed 700, including 150 principal investigators (PIs). The Onizuka property will:

1. Enable the decompression of the Palo Alto and Menlo Park Divisions which will provide more space for direct patient care
2. Facilitate the expansion of research facilities with ample parking and available space for an increasing number of research staff
3. Provide a seismically safe space for current Palo Alto and Menlo Park research functions and allow for older, dilapidated and seismically deficient buildings to be razed.

We remain committed to taking care of our nation's veterans and we sincerely hope that the City of Sunnyvale will support our proposal to expand VA and Stanford research to Onizuka AFS. Attached is a copy of our application, Request for Transfer of Excess Real and Related Personal Property, to the Department of Defense. If you have any questions, please feel to contact me at (650) 493-5000 x65238.

Sincerely,

Jason Nietupski
Jason Nietupski
Facility Planner

VA Sierra Pacific Network (VISN 21)
VA Palo Alto Health Care System, Palo Alto, CA

Overview:

The VA Palo Alto Health Care System (VAPAHCS) is a major tertiary care referral center with three hospital-based divisions and a network of six community based outpatient clinics (CBOCs). VAPAHCS provides primary, secondary and tertiary care within a large geographical region encompassing a 10 county, 13,500 square mile catchment area. Approximately 325,000 veterans reside within VAPAHCS' primary service area (PSA). In FY04, VAPAHCS' veteran enrollment was 80,866, which represents an 83 percent increase when compared to FY99 statistics.

The Palo Alto Division [PAD] is home to one of VA's flagship tertiary care referral centers. This division provides acute inpatient medicine, surgery, psychiatry, spinal cord, rehabilitation medicine, blind rehabilitation, traumatic brain injury, and hospice-palliative care services. The Menlo Park Division [MPD] provides a broad range of mental health programs ranging from substance abuse, PTSD, homeless rehabilitation, gero-psychiatric and extended care services. MPD is a regional referral facility for domiciliary and inpatient gero-psychiatric services. MPD is also home to a National Center for PTSD. The Livermore Division [LVD] provides nursing home inpatient care along with primary, specialty, mental health and ancillary outpatient services. In addition to these three (3) inpatient divisions, VAPAHCS operates six outpatient clinics (CBOCs) located in Capitola, Modesto, Monterey, San Jose, Sonoma, and Stockton. Collectively, these nine (9) facilities provided 692,227 outpatient encounters in FY04.

VAPAHCS operates a total of 913 beds including 49 internal medicine, 42 surgical, 92 acute psychiatry, a 43-bed Spinal Cord Injury (SCI) Center, a 32-bed Western Blind Rehabilitation Center, a 16-bed rehabilitative medicine - Traumatic Brain Injury (TBI) Center, a 100-bed homeless domiciliary, and 454 skilled nursing home beds, including a 109-bed gero-psychiatric nursing home, 321 extended care beds and a 24-bed hospice/palliative care unit. Collectively, these three (3) inpatient divisions provided 261,664 Bed Days of Care (BDOC) in FY04.

VAPAHCS operates a number of national referral programs including cardio thoracic surgery, organ transplant, traumatic brain injury and Post Traumatic Stress Disorder (PTSD). In addition to these national centers, VAPAHCS operates a number of specialized regional referral programs and treatment centers including spinal cord injury, blind rehabilitation, and homeless veteran's rehabilitation (domiciliary).

VA research in partnership with Stanford University School of Medicine, has enabled VAPAHCS to remain a leader in research and education. With a \$46 million annual research budget, 700 researchers operate one of the largest research enterprises in VHA with extensive research centers in geriatrics (GRECC), mental health (MIRECC), Alzheimer's disease, spinal cord regeneration and schizophrenia. VAPAHCS operates a Rehabilitation Research and Development Center, and a Health Economics Resource Center a Cooperative Studies Program Coordinating Center, and a Program Evaluation & Resource Center. VAPAHCS operates a Mental Illness Research & Education Clinical Center (MIRECC), and was selected as the site for the first Center for Quality Management in HIV Care. VAPAHCS is also home to a Patient Safety Center of Inquiry, which operates two state-of-the-art simulation centers.

VAPAHCS operates one of the largest Graduate Medical Education (GME) programs in VHA. In FY04, medical training was provided to 1,342 trainees including medical students, interns, residents and fellows from 161 academic institutions.

VAPAHCS' Prestigious Awards include:

Centers of Excellence: VAPAHCS was awarded six Centers of Excellence including: Autopsy, Domiciliary Care for Homeless Veterans (DCHV), HIV/AIDS Services, Spinal Cord Injury, Comprehensive Medical Rehabilitation and Cardiac Surgery. No other VA Medical Center has surpassed this accomplishment.

Crafoord Award: This prestigious prize, awarded by the Royal Swedish Academy of Sciences, marks accomplishments in scientific fields not covered by the Nobel Prizes and provides \$500,000 to the recipient. Dr Butcher's achievements were in the field of polyarthritis.

William S. Middleton Award: This award is Medical Research Service's highest scientific honor in VHA. - Eugene Butcher, MD, PhD

David H. Worthen Award for Academic Excellence (Highest award given by the Department of Veterans Affairs to recognize outstanding achievements of national significance in health professions education) - 2003 - David Gaba, MD - Patient Simulation & 2002 - James Hallenbeck, MD - Hospice Palliative Care

Mark Wolcott Award for Clinical Excellence This award recognizes significant achievement in the quality of healthcare - 2000 - George Sullivan, MD

VA Palo Alto Health Care System - Fiscal Year 2005 Statistics

Total Operating beds:	913
Acute Hospital:	297
Nursing Home:	454
Domiciliary:	100
PRRTP*:	62

Inpatient Admissions:	9,369
Hospital Bed Days of Care (BDOC):	261,664
Outpatient Encounters:	692,227
Number of Unique Veterans Treated:	53,955
Number of Enrolled Veterans:	80,866

Total Operating Budget:	\$470,000,000
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Research Budget:	\$52,000,000
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Total Staff:	3,001
- Direct Patient Care Staff	2,004
- Support/ Administrative	997
All Other Staff:	
- Trainees	1,342
- Research Staff	750
- Volunteers	1,543

* Psychiatric Residential Rehabilitation Treatment Program

REQUEST FOR TRANSFER OF EXCESS REAL AND RELATED PERSONAL PROPERTY	1. GSA CONTROL NO.	PAGE OF 1 PAGES	THIS BLOCK FOR USE BY AGENCY RECEIVING REQUEST
	2. DATE OF REQUEST		DATE REQUEST RECEIVED
TO (Name, address and ZIP Code of agency being requested to transfer the property)	4. FROM (Name, address and ZIP Code of agency requesting transfer of the property)		HOLDING AGENCY NO. (If any)
Department of the Air Force Office of the Assistant Secretary of the Air Force 1665 Air Force Pentagon Washington DC 20330-1665	Department of Veterans Affairs 810 Vermont Avenue NW Washington, DC 20420		ACQUISITION COST \$
			APPRAISED FAIR MARKET VALUE
			REIMBURSEMENT \$
REQUESTING AGENCY'S REPRESENTATIVE TO BE CONTACTED FOR FURTHER INFORMATION (Name, address and ZIP Code)	6. PROPERTY IDENTIFICATION AND ADDRESS (Include ZIP Code)		
Lisa Thomas / Dedra Siebel Department of Veterans Affairs 810 Vermont Avenue NW Washington, DC 20420	Onizuka Air Force Station 1080 Lockheed Martin Way Sunnyvale, CA 94089		

REAL PROPERTY REQUESTED					
STRUCTURES			B. LAND		C. UTILITIES
USE (a)	NUMBER OF BUILDINGS (b)	FLOOR AREA (Sq. Ft.) (c)	GOVERNMENT'S INTEREST (a)	AREA (Acres of Sq. Ft.) (b)	
OFFICE	1.00	50,560.00	(1) FEE	1.53	
STORAGE	1.00	2,200.00	(2) LEASED		
OTHER (Specify)	1.00	4,205.00	(3) OTHER (Specify)		
TOTAL	3.00	56,965.00	(4) TOTAL	1.53	
RELATED PERSONAL PROPERTY REQUESTED					9. ARE FUNDS AVAILABLE FOR REIMBURSEMENT FOR THE TRANSFER OF THIS PROPERTY?
No personal property requested.					
					<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

CERTIFICATION
 Certification is hereby made that this agency has a need for the property identified above to carry on an approved program; that the transfer thereof to this agency for the purposes indicated would be in accord with the intent of the Congress with respect to that program; that the requirement cannot be satisfied by better use of this agency's existing property; and that the proposed land use is consistent with FMR 102-75.25 and 102-75.30. The statement of justification under block 11 below for the transfer of the property is requested is complete and accurate.

SIGNATURE	TITLE	DATE
	Secretary of Veterans Affairs	

STATEMENT OF JUSTIFICATION (This statement must include data with respect to all factors covered in Block 11, Instructions for Preparation of Form GSA-1334).

a. See Army BRAC Application for Transfer Statement b.
 b. See Army BRAC Application for Transfer Statement c.
 c. See Army BRAC Application for Transfer Statement g.
 d. See Army BRAC Application for Transfer Statement h.
 e. See Army BRAC Application for Transfer Statements d and f.
 f. See Army BRAC Application for Transfer Statement e.
 g. See Army BRAC Application for Transfer Statement d.
 h. See Army BRAC Application for Transfer Statement h.
 i. VA has not yet performed this coordination, but intends to comply with requirements -
 See attached Form 1334 Note 11.i and Air Force BRAC Application for Transfer Statement j.

Air Force BRAC Application for Transfer Requirements

a. A completed GSA Form 1334, Request for Transfer signed by VA Secretary

A completed Form 1334 signed by the Honorable R. James Nicholson, Secretary of Veterans Affairs is attached as required.

b. A statement that the request does not establish a new program (i.e., one that has never been reflected in a previous budget submission or Congressional action).

VA Task – Confirm and complete the following draft response

The Department of Veterans Affairs (VA), established as an independent agency under the President by Executive Order 5398 on July 21, 1930, was elevated to Cabinet level on March 15, 1989 (Public Law No. 100-527).

The Veterans Health Administration (VHA) operates the Nation's largest integrated health care system. It provides care to 4,997,772 million unique patients with 54,012,534 million outpatient visits in 2004. To carry out its mission to provide medical care, VHA operated (as of December 31, 2004) 157 hospitals, 869 outpatient clinics, 134 nursing homes, 42 residential rehabilitation treatment programs, and 206 readjustment counseling centers including facilities in every state, the Commonwealth of Puerto Rico, the American Virgin Islands, Washington, DC and Guam.

The Veterans Benefits Administration (VBA) is responsible for administering the Department's programs that provide financial and other forms of assistance to veterans, their dependents, and survivors. Major benefits include veterans' compensation, veterans' pension, survivors' benefits, rehabilitation and employment assistance, education assistance, home loan guaranties, and life insurance coverage. The VBA provides these services through its 57 regional offices.

VA provides services and benefits to eligible beneficiaries as authorized by Title 38, U.S.C. The property identified in this Request for Transfer will be utilized for the Medical Facilities program to support the program's annually appropriated activities. The Medical Facilities appropriation finances the operations, maintenance, construction, and alteration of the VA health care systems' vast capital infrastructure. The capital investment accounts necessary to ensure VA's infrastructure is adequate to support the delivery of quality health care are within the Medical Facilities appropriation. The capital investment programs include:

Major Construction: Provides for constructing, altering, extending, and improving any VA facility for the provision of health-care services where the estimated cost of a project is greater than \$7,000,000.

Minor Construction: Provides for constructing, altering, extending, and improving any VA facility for the provision of health-care services where the estimated cost of a project is less than \$7,000,000.

Grants for Construction of State Extended Care Facilities: Provides for grants to assist States to acquire or construct State nursing home and domiciliary facilities in State homes, for furnishing care to veterans.

Department of Veterans Affairs Capital Asset Fund: Provides for costs associated with the transfer and future transfers of real property; enhancing medical care services to veterans by improving patient care.

FOR RESEARCH FACILITIES:

For 2006, the total budgetary resources of \$1.7 billion remain essentially unchanged. These resources are comprised of direct appropriations of \$786 million and federal and private sector

grants of \$866 million, which represents 52 percent of the total resources.

The 2006 budget request reflects a new account structure that will better position VA to more readily determine the full cost of a comprehensive research program leading the Nation's efforts to promote the health care of veterans. The Medical and Prosthetic Research Business Line includes the consolidation of what was the Medical and Prosthetic Research appropriation and the medical care research support funding formerly appropriated in the Medical Care appropriation.

This account is an intramural program whose mission is to acquire knowledge and create innovations that advance the health and care of veterans and the Nation. Veterans' health issues are addressed comprehensively in the following four program divisions and the medical care research support required for these programs:

Bio-medical Laboratory Research and Development Service.—This research strives to understand the disease process so that efficient, rational interventions can be made to cure or alleviate the effects of disease. The program supports investigator-initiated research projects, the training of clinicians in basic and clinical research, and centers of excellence devoted to specific diseases. The research is done in areas particularly relevant to the veteran population—aging, chronic disease, mental illness, substance abuse, military occupations, and environmental exposures.

Rehabilitation Research and Development Service.—Rehabilitation Research is dedicated to the development and application of science and engineering to improve the care and quality of life for the physically disabled. The program supports investigator-initiated research projects, the training of clinicians and engineers in rehabilitation research, centers of excellence devoted to specific disabilities, and technology transfer. The research is done in areas particularly relevant to the disabled veteran population—aging, sensory loss, and trauma related illness.

Health Services Research and Development Service.—Health Services Research is directed toward improving the outcome effectiveness and cost efficiency of health care delivery for the veteran population. The program supports investigator-initiated research projects, the training of clinicians in applied clinical research, centers of excellence devoted to specific aspects of health care delivery, and service-directed projects addressing clinical management needs. The research focuses on the translation of research findings to clinical best practices for all veteran patients. Particular contributions are made in the areas of aging, substance abuse, health systems, and special populations.

Clinical Science Research and Development Service.—Clinical Science Research will encompass interventional and observational studies in humans, including pharmacological and surgical studies.

Medical Research Support.—Provides the indirect costs of the VA Research and Development program which includes such costs as the facility utility costs associated with laboratory space; administrative costs of human resources support, fiscal service, and supply service attributable to research; research's portions of a medical center's hazardous waste disposal and nuclear medicine licenses; and, most importantly, the funding for the time clinicians devote to their research activities. VA's Medical and Prosthetic Research programs are included in the Federal Science & Technology (FS&T) budget.

Focus on Training Clinical Researchers.—The objective of the Career Development program is to train an appropriate number of VA clinicians who can conduct research in areas of high relevance to the health care of veterans.

The Department of Veterans Affairs is funded through the Military Quality of Life/Veterans Affairs annual appropriation, most recently codified in P.L. 109-114 (2005).

The transfer of the Onizuka Air Force Station does not establish a new program and is compatible with currently authorized and funded VA activities. The VA Palo Alto Health Care

System has become overcrowded due to a growing patient population and an increase in research programs. Many of VA's research functions are located in facilities considered Exceptionally High Risk according to seismic reports. The VA would like to relocate some non-wet lab research functions a portion of the Onizuka AFS property including one administrative building (Building 1002) and utilize two storage structures (Buildings 1018 & 1034) for support.

c. A statement that the requesting Component or agency has reviewed its real property holdings and cannot satisfy its requirement with existing property. This review must include all property under the requester's accountability, including permits to other Federal agencies and outleases to other organizations.

VA Task – Provide responses to the following:

(1) The extent of internal screening of property, including property under permit or outlease:

The VA Palo Alto Health Care System is one of the largest and fastest growing VA Medical Centers within the Department of Veterans Affairs due in part to its strong academic affiliation with the Stanford University School of Medicine. VA's Capital Asset Inventory (CAI) database for VA Palo Alto Health Care System's Palo Alto Division shows that it currently contains 1,402,893 GSF of space, while the VA Space Driver Database shows a space requirement of 1,703,890 SF based on the existing workload and functional level that the Division maintains.

Based on these two databases, the Palo Alto Division campus has an existing space deficiency of 300,997 GSF. In addition, outpatient encounters have increased 38 percent over the past four years and VA's actuarial projections predict a 20 percent increase in outpatient workload by 2012. During this same time period, Palo Alto Division's research staff has increased by 30 percent to over 750. Based on the aforementioned space requirements, the VA does not have any available or suitable property on the Palo Alto Division campus to expand its operations.

Furthermore, the Palo Alto Division operates a number of seismically deficient buildings, buildings that have been identified as Exceptionally High Risk and structural engineers have concluded that during a significant seismic event, these buildings "are in danger of collapsing."

As a result of these space and functional issues, the Onizuka Air Force Station provides an excellent opportunity to decompress the Palo Alto Division campus by relocating research activities capable of operating remotely.

(2) Name of specific alternate VA properties considered, but rejected (state why rejected?):

There are no VA sites available to accommodate VA's existing research programs.

(3) Indicate property identified as excess to VA needs during screening (complete report of excess):

There is no excess VA property in the San Francisco Bay, central to both campuses, available for reuse. The VA Palo Alto Health Care System has seen tremendous clinical and research growth over the past five years. As a result, any underutilized space has been completely accounted for and is currently occupied. In addition, approximately 50 percent of VA Palo Alto Health Care buildings are considered seismically unsafe.

(4) Describe property presently used for VA activity and tenure of occupancy (if replacing current property, a report of excess will be a condition for replacement):

Over 50 percent of VA Palo Alto Health Care System's buildings have been identified as seismically unsafe. Thus the 340,740 GSF of research space available at the Palo Alto campus today will be reduced by 157,750 SF when seismically deficient buildings are

razed. Additionally, the expected demolition in 2008 of building 205 (72,300 SF) and building 301 (7,600 SF) at VA's Menlo Park Division, will further constrain already tight research space.

It is expected that both research funding and outpatient encounters will continue to grow over the next few years, further constraining both Palo Alto and Menlo Park campuses. Needed square feet of research for 2005 based on funding was 346,667 SF, about 5,927 SF greater than current VA facilities accommodate. As research funding increases, the gap variance between actual space and needed space will grow. Relocating research functions that require limited to no patient studies from Palo Alto and Menlo Park will:

- 1) Enable the decompression of the Palo Alto and Menlo Park to provide more space for patient care
- 2) Facilitate the expansion of research facilities with ample parking and available space for an increasing number of research staff
- 3) Provide a seismically safe space for current Palo Alto and Menlo Park research functions and allow for old research facilities to be razed.

d. A statement that the requested property would provide greater long-term economic benefits for the program than acquisition of a new facility or other property.

VA Task - Confirm and complete the following draft response. Add any other pertinent facts that may be important to justify the transfer (security, proximity, etc.)

The combination of parking and accessibility to the other area VA facilities makes this location a priority.

The location of the Onizuka Air Force Station is central to both Palo Alto and Menlo Park campuses and has parking capacity of 100 spaces. This property is ideally located adjacent to Highway 237 and in close proximity to U.S. 101, resulting in a 10-15 minute commute from the Palo Alto and Menlo Park Divisions. VA Palo Alto Health Care System would have difficulty identifying and acquiring a similar parcel within the Cities of Palo Alto or Menlo Park. Palo Alto and Menlo Park remain among the most expensive locations in the United States in terms of property valuation because it is situated in the center of Silicon Valley.

e. A statement that the program for which the property is requested has long-term viability.

VA Task - Confirm the following draft response is acceptable.

The Department's mission is to serve America's veterans and their families with dignity and compassion and to be their principal advocate in ensuring that they receive medical care, benefits, social support, and lasting memorials promoting the health, welfare, and dignity of all veterans in recognition of their service to this Nation. The estimated total veteran population was 24,793,000 as of September 30, 2004. This included 8,147,000 Vietnam era veterans, representing the single largest period-of-service component of the veteran population. Gulf War era veterans now comprise the second largest component, numbering 4,105,000. World War II veterans numbered 3,916,000, while Korean conflict veterans totaled 3,423,000. Regardless of the sequence of events in the future, VA remains dedicated to the core mission of serving our nation's veterans.

f. A statement that considerations of design, layout, geographic location, age, state of repair, and expected maintenance costs of the requested property clearly demonstrate that the transfer will prove more economical over a sustained period of time than acquiring a new facility.

VA Task – Provide O&M for current facilities being considered for replacement with transferred property identified at the DoD installation.

Jones Lang LaSalle Task – Collect the O&M for the site being considered to make an assessment of the “economies in the form of estimated annual recurring savings” through comparison (over time).

For the reasons noted in statement “d” above, VA has estimated that transfer of the facility will prove more economical over a sustained period of time than acquiring a new facility.

In support of this determination, the attached inventory of buildings and structures includes descriptive elements such as age, size, construction, condition, current use, contents and any historical or other constraints that were used by VA in making this determination (please see chart after statement “j”).

g. A statement that the size of the property requested is consistent with the actual requirement.

Jones Lang LaSalle Task - Compare site data collected to the EOI matrix provided by VA.

The VA Palo Alto Health Care System has identified the potential reuse of the site to accommodate only a portion of its non-wet lab research functions to alleviate space deficiencies elsewhere due to expanding research programs as well Exceptionally High Risk (HER) structures within the existing buildings. The total space need for its non-wet lab research functions is as high as 237,000 SF even though the available GSF at this location is only 50,560 GSF.

h. A statement that fair market value reimbursement to the Air Force will be made at the later of January 2008 or the time of transfer, unless this obligation is waived by the Office of Management and Budget and Air Force, or a public law specifically provides for a non-reimbursable transfer. (This requirement does not apply to requests from DOD Components).

VA Task – Confirm the following language

Fair market value reimbursement to the Air Force will be made at the later of January 2008 or the time of transfer, unless this obligation is waived by the Office of Management and Budget and Air Force. This commitment is subject to Congressional appropriations and negotiations on the fair market value to fund the reimbursement.

i. A statement that the requesting DOD Component or Federal agency agrees to accept the care and custody costs for the property on the date the property is available for transfer, as determined by the Air Force.

Jones Lang LaSalle Task – Draft response based on information collected regarding the site (environmental issues, etc.).

The VA agrees to accept the care and custody costs for the property on the date the property is available for transfer, as determined by the Air Force. The VA reserves the right to negotiate

Air Force BRAC Application for Transfer Requirements

with the Air Force for a specified period of time to resolve unidentified/unknown issues at the time of transfer.

j. A statement that the requesting agency agrees to accept transfer of the property in its existing condition, unless this obligation is waived by the Air Force.

Jones Lang LaSalle Task – Draft response based on the site information collected, including physical, environmental, historic, cultural and archeological constraints as well as O&M.

Should the Air Force opt not to waive this obligation, the VA agrees to accept transfer of the property in its existing condition on the basis that all environmental, historic, cultural and archeological constraints have been identified by the Air Force prior to transfer. The VA reserves the right to negotiate with the Air Force for a specified period of time to resolve unidentified/unknown issues at the time of transfer.

Should the Air Force opt to waive this obligation, then all improvements on the property shall be transferred in a condition negotiated by the VA and the Air Force.

Air Force BRAC Application for Transfer Requirements

Supporting Documentation for Air Force BRAC Application for Transfer Section f:

Building	Size	Description
Headquarters Building (1002)	50,560 SF	<u>Date constructed:</u> 1969 <u>Levels:</u> 2-story with no elevators <u>Walls:</u> Concrete block outside; Demountable partitions inside the building <u>Restrooms:</u> Men's and women's <u>Contents:</u> Administrative space throughout the building including refurbished space upstairs with dark wood, carpet, and conference rooms
Base Exchange (1018)	2,200 SF	<u>Date constructed:</u> 1981 <u>Levels:</u> 1-story <u>Construction:</u> Concrete/metal
Storage (1034)	4,205 SF	<u>Date constructed:</u> 1988 <u>Levels:</u> 2-story <u>Construction:</u> Metal
Total	56,965 SF	

Notes to Form 1334
Onizuka Air Force Station

Form 1334, Section 7:

A. Structures

Use: (1) Administrative		
Bldg. No.	Name	GSF
1002	Headquarters Building	50,560

Use: (2) Storage		
Bldg. No.	Name	GSF
1034	Storage Shed	4,205

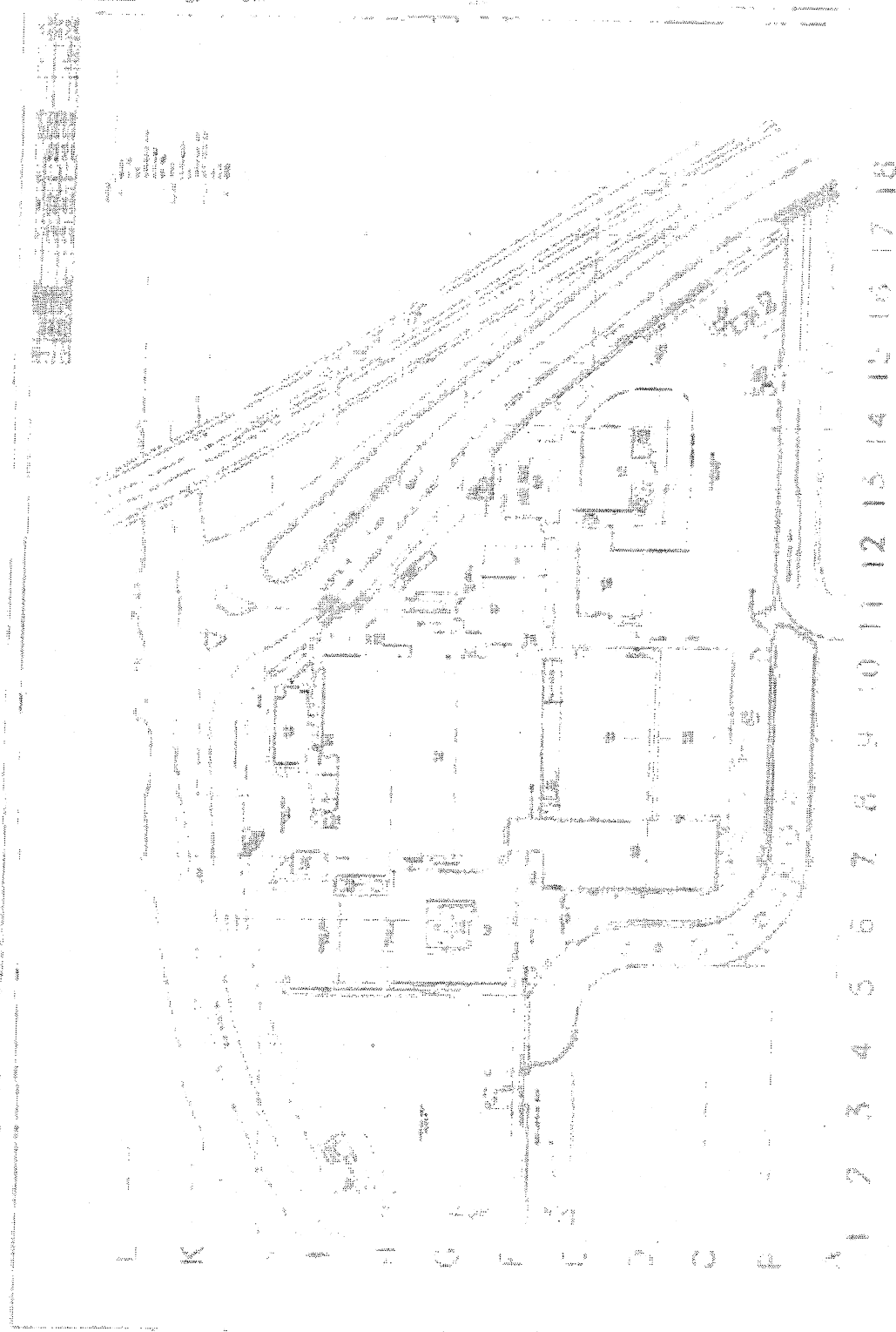
Use: (3) Other		
Bldg. No.	Name	GSF
1018	Base Exchange	2,200

Total Structures (4)		GSF
3 buildings*		56,965

*Building inventory described does not detail additions to buildings and supporting structures on site (flagpoles, gardens, statues). VA requests all structures on site, including supporting structures and additions.

B. Land

Survey of the premises showing its boundaries and location:



ON-DA-1 (1910) MAP

Legend

1	Asphalt
2	Concrete
3	Gravel
4	Grass
5	Water
6	Other

B. Land Requested

Footprint of Bldg. 1002	25,280 sf*
Footprint of Bldg. 1018	2,200 sf*
Footprint of Bldg. 1034	4,205 sf*
100 parking spaces	35,000 sf*
Total	66,685 sf or 1.53 acres

*All square footages are approximations calculated using the gross square footage of the buildings and the number of floors. Parking spaces calculated by multiplying 300 sf per space by 100 spaces.

Form 1334, Section 9:

Funds available for reimbursement for the transfer of this property as delineated in the Army BRAC Application for Transfer Statement h.

Form 1334, Section 11:

i. None of the facilities referenced above are considered part of a "Historic District." VA will work with local government, community organizations and any other regulatory bodies, as necessary, to address coordination issues.



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Instructions for preparation of GSA-1334,
Request for Transfer of Excess Real Property
and Related Personal Property

General Instructions.

This form shall be used by agencies when requesting the transfer of excess real property and related personal property therein as defined by 41 CFR 102-75.20. The original and first three copies shall be filed with the regional office of GSA or the agency which notified the requesting agency that the property is available.

Block for Use of Agency Receiving Request. Certain terms used in this block are explained as follows:

Acquisition Cost. Where the actual acquisition cost is known that cost, of course, will be used. If it is not known, an estimate will be substituted therefore.

Appraised Fair Market Value. The appraised fair market value shall be obtained and set forth in this block in all cases, regardless of whether the property is to be transferred with or without reimbursement.

Reimbursement. The actual monetary amount of reimbursement to be required will be shown; whether it be zero, the full appraised fair market value of the property, or fifty percent of that sum.

Specific Instructions.

- Block 1 Enter the GSA Control Number as shown on the Notice of Availability.
- Block 2 Enter the date the request is made.
- Block 3 Enter the name and address of the office of the agency to which the request is being made.
- Block 4 Enter the name and address of the office of the agency transmitting the request.
- Block 5 Enter the name and address of the requesting agency's representative to be contacted for further information.
- Block 6 Enter the official title or name shown on the Notice of Availability to identify the property and the street address, city, county, and State for urban property, or the RFD address, county, and State for rural property.
- Block 7 ITEM A - STRUCTURES.

Column (b). Enter the number of structures for office use on line (1); for storage use on line (2); and for other use on line (3), and specify on line (3) the intended use. Enter the total number of structures on line (4).

Column (c). Enter the gross floor area (in terms of square feet) of the space for office use on line (1); for storage use on line (2); and for other use on line (3). Enter the total gross floor area on line (4).

ITEM B - LAND.

Column (b). Enter the Government fee owned land on line (1); the Government-leased land on line (2); and the land used by the Government under other rights of occupancy on line (3), and specify on line (3) such rights of occupancy. Enter the total on line (4). Indicate the unit of measure used. Attach a survey description of the land or a drawing showing its boundaries and location.

ITEM C - UTILITIES.

Enter a general description of the utilities and miscellaneous facilities, including facilities such as railroad trackage, docks, wash racks, and gasoline storage.

- Block 8 Enter a description of the nature of related personal property such as manufacturing equipment, maintenance equipment, and supplies.
- Block 9 Indicate by a check mark, in the appropriate square, whether or not funds are available for reimbursement for the transfer of this property.
- Block 10 Enter the signature and title of official of requesting agency authorized to make the application, and the date signed.
- Block 11 Enter the statement of justification for the transfer of the property requested. This statement must include data with respect to all of the factors set forth in 41 CFR 102-75.25. These data should be complete and fully documented as far as practicable. Generally, the following information will suffice as the basis for making a determination as to whether the transfer will be in the best interest of the Government.
- a. Show compatibility of the proposed use with the authorized program.
 - (1) Explain the specific use to be made of the property and describe the program for which it is to be used. Indicate how the use to be made of the property is compatible with the authorized program in order to demonstrate that the proposed transfer does not establish a new unauthorized program nor does it substantially increase the level of the requesting agency's existing program beyond that contemplated in the President's budget or by the Congress.
 - (2) Cite the statutory authority on which the program is based and identify the title of the appropriation (or appropriations) which supports the activity that will benefit from the transfer of the property.
 - b. Show that internal screening of agency property has not revealed any available, suitable property for the proposed use.
 - (1) Indicate the extent of the screening accomplished, including that property under permit or outlease.
 - (2) Name the specific alternate properties given consideration and discarded. State the reasons for rejection.
 - (3) Indicate any property revealed by such screening as excess to agency requirements. A report of excess should be processed covering any such property.
 - (4) Describe the property presently used for the activity and tenure of occupancy. If the property to be transferred will replace real property now under agency control which is presently required for the activity, a report of excess of the property being replaced shall be a condition of the transfer.
 - c. State the extent to which all buildings, facilities and land are to be used. If less than the full parcel is needed, the request for transfer should be made for only the portion needed, unless it can be shown that the remaining part probably could not be sold or utilized by another agency.
 - d. Give an estimate of the acquisition cost of other suitable property and an estimate of the probable sale price if the property requested for transfer were to be put to its highest and best use. If such purchase price is substantially less than the probable

sale price of the property proposed for transfer, give an explanation of why the purchase is not made instead of requesting the transfer.

- e. State the economies to be effected in the form of actual or estimated annual recurring savings, if any, in rental, maintenance operation, or other current costs resulting from the transfer. Show that the transfer will prove more economical over a substantial period of time than the acquisition of a new facility specifically planned for the purpose. In demonstrating the economies to be effected, specific consideration should be given to the design, layout, geographic location, age, and state of repair of the real property proposed for transfer as well as the aforementioned saving and current cost. Describe any other efficiencies in agency operation which will result from the transfer.
- f. Advise whether the program to be served by the transferred property is scheduled for substantial curtailment or termination. In such instances, the property may be transferred on a conditional basis with the understanding that it will be released for further utilization or disposal as surplus property at a time agreed upon when the assignment is arranged.
- g. State any other pertinent facts which the requesting agency may deem to be appropriate to justify the transfer,
- h. In those instances where the agency proposes to obtain the transfer without reimbursement, the documents required under the provisions of 41 CFR 102-75.190.
- i. Advise whether coordination has been had with State, regional, and local agencies to determine compatibility of the proposed use with their plans and programs in accordance with Executive Order 12372 which supercedes Part II of OMB Circular No. A-95, Revised, dated February 9, 1971, as amended.

When the requested property is listed or may be eligible for listing on the National Register of Historic Places, or is in the immediate vicinity of a property on the National Register, evaluate the effect on the historic character of the property of the proposed use of the property and any planned repair, rehabilitation, restoration, and maintenance work by applying the "Criteria for Effect" in the Procedures for Compliance with section 106 of the National Historic Preservation Act of 1966, issued by the Advisory Council on Historic Preservation. If it is decided there is a beneficial effect or no effect, state the decision and basis. If it appears that there may be an adverse effect on the property, the agency requesting the transfer of the property shall be responsible for taking all action required under the procedures of the Advisory Council on Historic Preservation to mitigate the adverse effects. The agency shall record actions taken and their disposition, and attach copies of appropriate documents.